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indicated unless corrected maintenance fee notification		cted otherwi	se in Block 1, l	by (a) spe	cifying 	a new corres	pondence	address; and/o	or (b) indicating a separ	rate "FEE ADDRESS" for		
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35617	7590 03/23/2006 Eat					certificate	certificate of mailing or transmission.					
DAFFER McDANIEL, LLP P O BOX 684908 AUSTIN TX 78768-4908						States F address	Certificate of Malling or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above, or being facsimile transmitted to the USPTO, on the date indicated below.					
						06/26/2006 /Pamela Gerik/ Date Pamela Gerik						
APPLICATION NO.	FILING DATE			FIRST NAMES INVENTOR				ATTORN	NEY DOCKET NO.	CONFIRMATION NO.		
10/725,744	12/02/				en R.	R. Lange		5589-	05201 P1067	3066		
TITLE OF INVENTION:	SYSTEMS I	ORINSP	ECTING WA	AFERS A	AND F	RETICLES	WITH IN	CREASED F	RESOLUTION			
APPLN. TYPE SM		SMALL	LL ENTITY ISSUE FE			EE	E PUBLICAT		TOTAL FEE(S) DUE	DATE DUE		
nonprovision	nonprovisional				1,400			0.00	\$1,400.00	06/23/2006		
EXAMINER						ASS-SUBCLASS						
Stafira, Micha	Stafira, Michael Patrick		2877		3	356-237100						
1.363). Change of correspondence address (or Change of Correspondence altern Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SM/47) attached. Use of a Customer Number is required.						ist (1) the name patent attome alternatively, (3 (having as a mattomey or age 2 registered pa	For printing on the patent front page, t (1) the names of up to 3 registered tent attorneys or agents OR, rematively, (2) the name of a single firm awing as a member a registered tomey or agent) and the names of up to registered patent attorneys or agents. The no name is listed, no name will be inted. Ann Marie Mewherter Daffer McDaniel, LLP					
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when as assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.												
(A) NAME OF ASSIGNEE: KLA-Tencor Technologies Corp. (B) RESIDENCE (CITY & STATE OR COUNTRY): Milpitas, CA												
Please check the appropria	ite assignee cat	egory indicate	ed below (will n	ot be printe	ed on th	he patent): 🔲	individual	corporation	n or other private group	entity		

(A) NAME OF ASSIGNEE: KLA-Tencor Tec	chnologies Corp. (B) RESIDENCE (CITY & STATE OR COUNTRY): Milpitas, CA						
Please check the appropriate assignee category indicated below (will not be printed on the patent): 🔲 individual 🔼 corporation or other private group entity 🔲 government							
4a. The following fees are enclosed:	4b. Payment of Fee(s)::						
☑ Issue Fee	☑ Payment is enclosed herewith.						
☐ Publication Fee	Payment by credit card. Form PTO-2038 is attached.						
Advance Order - # of Copies <u>4</u>	☑ The Commissioner if hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-3268 (enclose an extra copy of this form).						
5. Change in Entity Status (from status indicated ab	ove)						
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.							

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Authorized Signature /Ann Marie Mewherter/ Date June 26, 2006
Ann Marie Mewherter Registration No. 50.484

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